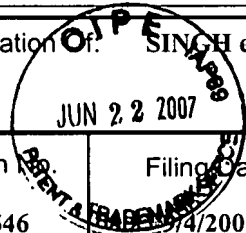
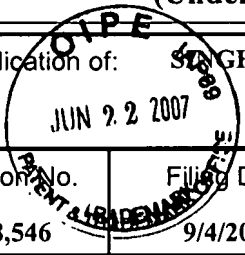
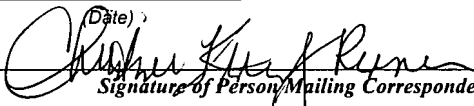
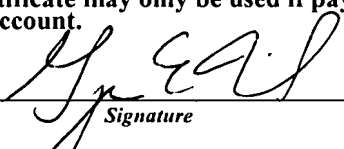



IFW

TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT (Under 37 CFR 1.97(b) or 1.97(c))				Docket No. RLL-499US	
In Re Application Of: SINGH et al.					
					
Application No.	Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.
10/598,546	5/4/2006	Unknown	26815	Unknown	7158
Title: PROCESSES FOR THE PREPARATION OF SOLID DOSAGE FORMS OF AMORPHOUS VALGANCICLOVIR HYDROCHLORIDE					
<p>Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450</p> <p>37 CFR 1.97(b)</p> <p>1. <input checked="" type="checkbox"/> The Information Disclosure Statement submitted herewith is being filed within three months of the filing of a national application other than a continued prosecution application under 37 CFR 1.53(d); within three months of the date of entry of the national stage as set forth in 37 CFR 1.491 in an international application; before the mailing of a first Office Action on the merits, or before the mailing of a first Office Action after the filing of a request for continued examination under 37 CFR 1.114.</p> <p>37 CFR 1.97(c)</p> <p>2. <input type="checkbox"/> The Information Disclosure Statement submitted herewith is being filed after the period specified in 37 CFR 1.97(b), provided that the Information Disclosure Statement is filed before the mailing date of a Final Action under 37 CFR 1.113, a Notice of Allowance under 37 CFR 1.311, or an Action that otherwise closes prosecution in the application, and is accompanied by one of:</p> <p><input type="checkbox"/> the statement specified in 37 CFR 1.97(e);</p> <p>OR</p> <p><input type="checkbox"/> the fee set forth in 37 CFR 1.17(p).</p>					

TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT (Under 37 CFR 1.97(b) or 1.97(c))					Docket No. RLL-499US	
In Re Application of: STAGH et al.						
						
Application No.	Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.	
10/598,546	9/4/2006	Unknown	26815	Unknown	7158	
Title: PROCESSES FOR THE PREPARATION OF SOLID DOSAGE FORMS OF AMORPHOUS VALGANCICLOVIR HYDROCHLORIDE						
<div style="text-align: center;"> Payment of Fee (Only complete if Applicant elects to pay the fee set forth in 37 CFR 1.17(p)) </div> <p> <input type="checkbox"/> A check in the amount of _____ is attached. </p> <p> <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>50-0912</u> as described below. </p> <div style="margin-left: 40px;"> <input type="checkbox"/> Charge the amount of _____ </div> <div style="margin-left: 40px;"> <input type="checkbox"/> Credit any overpayment. </div> <div style="margin-left: 40px;"> <input checked="" type="checkbox"/> Charge any additional fee required. </div> <p> <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. </p> <p> WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. </p> <div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <p style="text-align: center;">Certificate of Transmission by Facsimile*</p> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> I certify that this document and authorization to charge deposit account is being facsimile transmitted to the United States Patent and Trademark Office (Fa </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> _____ (Date) </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> _____ Signature </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> _____ Typed or Printed Name of Person Signing Certificate </div> </div> <div style="width: 48%;"> <p style="text-align: center;">Certificate of Mailing by First Class Mail</p> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> June 19, 2007 (Date) </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">  Signature of Person Mailing Correspondence </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> Christine Kennedy-Renner Typed or Printed Name of Person Mailing Certificate </div> </div> </div> <p> *This certificate may only be used if paying by deposit account. </p> <div style="display: flex; justify-content: space-between; align-items: flex-end; margin-top: 20px;"> <div style="width: 45%;">  _____ Signature George E. Heibel, Esq. Reg. No. 42,648 CUSTOMER NO. 26,815 </div> <div style="width: 50%;"> <p>Dated: June 19, 2007</p> </div> </div> <p style="margin-top: 20px;">CC:</p>						

INFORMATION DISCLOSURE CITATION 	Docket No.: RLL-499US	Serial No.: 10/598,546
	Applicants: SINGH et al.	
	Filed: 9/4/2006	Group:

U.S. PATENT DOCUMENTS							
EXAMINER INITIAL		DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE
	A1	6,083,953	7/4/2000	Nestor et al.	514	262	
	A2	6,248,363	6/19/2001	Patel et al.	424	497	
	A3	6,395,029	5/28/2002	Levy	623	11.11	
	A4	2004/062805	4/1/2004	Vandecruys et al.	424	471	

FOREIGN PATENT DOCUMENTS							
		DOCUMENT NUMBER	DATE	COUNTRY	CLASS	SUBCLASS	TRANSLATION YES NO
	B1	IN 1053/Del/2003	8/28/2003	India			
	B2	WO 2004/010998	2/5/2004	PCT	A61K	31/428	

OTHER DOCUMENTS (Including Author, Title, Date, Pertinent Pages, Etc.)		

EXAMINER	DATE CONSIDERED
*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.	